Revised December 1974

(PRINT OR TYPE)

Pick up Address:

Type of Process which Produced Wastes:

Telephone Number: (__

Check type of wastes: 1. Acid solution

3. Pesticides

5. D Solvent

Other (Specify) Components:

organics (list), cyanida)

4. Paint sludge

2. Alkaline solution

P.O. or Contract No.: 40/6

Upper

☐ flammable

☐ tons

artons

🖺 liquid

The waste is described to the best of my ability and it was delivered to a licensed liquid waste hauler

(Examples: metal plating, equipment cleaning, oil drilling wastewater treatment, pickling bath, petroleum refining)

6. Tetraethyl lead sludge

7. Chemical toilet wastes

8. Tank bottom sediment

9. 🗌 Oil

10. Drilling mud

☐ toxic

🗌 gal

☐ drums

solid

HUMINUM OXIDES

PRODUCER OF WASTE (Must be filled by producer)

DESCRIPTION OF WASTE (Must be filled by producer)

(Examples: Hydrochloric acid, lime, caustic soda,

mone

phenolics, solvents (list), metals (list),

Hazardous Properties of Waste:

Special Handling Instructions (if any):

I certify (or declare) under penalty of perjury that the foregoing is true and correct.

Bulk Volume:

Physical State:

Containers:

applicable).

STATE DEPART

SIGNATURE OF AUTHORIZED AGENT AND TIPLE

barrels

(42 gal.)

☐ bags

sludge

STATE DEPARTM	ENT OF HEALTH SFUND RECORDS CTR
	HAULER OF WASTE (Must be filled by hauler) 999000844
WOW CODE NO.	ASBURY OIL CO. 13419 Halldale Ave., Gardena, California 90249 Phone: (213) 321-1392
401635	Pick Up: //-) . C
Date: 1/-280	Pick Up: //
, , —	Job No.: No. of Loads or Trips: Unit No
eaning, oil drilling — CODE No.	Vehicle: ☐ vacuum truck
etroleum refining)	The described waste was hauled by me to the disposal facility named below and was accepted.
11. Contaminated soil and sand	that the foregoing is true and correct.
12. Cannery waste	DISPOSER OF WASTE (Must be filled by disposer)
13. 🗌 Latex waste	2425
14. 🗌 Mud and water	Name (print or type): VONCEY (11), 1754 CODE NO.
15. 🗆 Brine	Site Address:
Concentration:	The hauler above delivered the described waste to this disposal facility and it was an acceptable material under the terms of RWQCB requirements, State Department of Health regulations, and local restrictions.
Lower % ppm	Quantity measured at site (if applicable):State fee (if any):
	Handling Method(s):
	treatment (specify): texamples: Incineration Neumanization, PRECIPITATION CODE NO.
H H	
	Other (specify):
	If waste is held for disposal elsewhere specify find location: Disposal Date:
□ corrosive □ explosive	I certify (or declare) under penalty of perjury that the foregoing is true and correct.
irrels	SONATURE OF AUTHORIZED AGENT AND TITLE
2 gal.) Other [SPECIFY]	The site operator shall submit a legible copy of each completed Record to the State Department of Health with monthly fee reports.
gs other // (specify)	/
udge other	
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
to a licensed liquid waste hauler (if	
Sand I'm	FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.
	HAZARDOUS WASTE OR WINER MATERIALS CALL 18001 424-9300.
F AUTHORIZED AGENT AND TIPLE	D.O.T. Proper Shipping Name

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